## PART B - FEE(S) TRANSMITTAL

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|  | orm should be used for transpressions or directed otherwise ons.  | smitting the ISSU<br>Patent, advance or<br>in Block 1, by (a           | JE FEE and Potential specifying a   | JBLICATION F<br>cation of mainte<br>new corresponde  | EE (if requested in the | uired). Blocks I through will be mailed to the curros; and/or (b) indicating a s                          | 5 should be completed where<br>ent correspondence address as<br>eparate "FEE ADDRESS" for  |  |  |
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| MACMILLAN, SOBANSKI & TODD, LLC<br>ONE MARITIME PLAZA - FOURTH FLOOR<br>720 WATER STREET<br>TOLEDO, OH 43604   |   |  |   | Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the Unite States Postal Service with sufficient postage for first class mail in an envelop addressed to the Mail Stop ISSUE FEE address above, or being facsimil transmitted to the USPTO (571) 273-2885, on the date indicated below. |  |   |  |  |  |
| /19/2005 MBERHE1 00000045 130005 10664811  |   |  |   | Katl   | א M. אינים   | Brownfield  | (Depositor's name)   |  |  |
|  |   | •  |   | Pob  | mbor   | y M. 2005   | (Signature) (Date)   |  |  |
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| APPLICATION NO. 10/664,81!   | 99/17/2003  | FIRST NAMI   |   |  | <u> </u>   | i-22818   | O. CONFIRMATION NO.  |  |  |
| APPLN. TYPE  | NTERNAL BALANCE COI   | ISSUE FEE  |   | PUBLICATIO   |  | TOTAL FEE(S) DUE  | DATE DUE   |  |  |
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| EXA  | EXAMINER  |  | IIT I   | CLASS-SUBO   | CLASS  | 7   |  |  |  |
| BINDA, GR  | BINDA, GREGORY JOHN   |  |   | 464-1270   | 000  | ,   |  |  |  |
| <ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol> |   |  | 2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |  |  |   |  |  |  |
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|  | s (from status indicated above  | •  | ☐ b. Applica  | nt is no longer cla  | aiming SMA   | ALL ENTITY status. See 3  | 7 CFR 1.27(g)(2).  |  |  |
| • •  |   |  |   |  |  |   | olication identified above.  or the assignee or other party i  |  |  |
| Authorized Signature   | Authorized Signature What Authorized  |  |   |  | Date   | ecember 14, 20  | 005  |  |  |
| Typed or printed name _  | Typed or printed name Richard S. MacMillan  |  |   |  | Registration   | n No. 30,085  |  |  |  |
| an application. Confidentia<br>submitting the completed a<br>this form and/or suggestion<br>Box 1450, Alexandria, Vir<br>Alexandria, Virginia 22313  | lity is governed by 35 U.S.C pplication form to the USPT is for reducing this burden, signia 22313-1450. DO NOT | . 122 and 37 CFR O. Time will vary hould be sent to the SEND FEES OR ( | 1.14. This colled<br>depending upon<br>e Chief Information<br>COMPLETED   | ection is estimate<br>in the individual<br>ition Officer, U.S<br>FORMS TO THI  | d to take 12 case. Any case. Any case. S. Patent and S. ADDRES   | minutes to complete, includent minutes on the amount of Trademark Office, U.S. I.S. SEND TO: Commission   | (and by the USPTO to process uding gathering, preparing, an f time you require to complet Department of Commerce, P.C. ner for Patents, P.O. Box 1450 trol number. |  |  |